

<b>CIVIL ACTION COVER SHEET</b>		DOCKET NO.(S)	Trial Court of Massachusetts Superior Court Department County: Suffolk										
PLAINTIFF(S)  Terry Gexler		DEFENDANT(S)  United Parcel Service Co.											
ATTORNEY, FIRM NAME, ADDRESS AND TELEPHONE Michael R. Rawson, Rawson Merrigan & Merrigan, 530 Atlantic Ave., Boston, MA 02210 Board of Bar Overseers number: 555361 617 348 0988		ATTORNEY (if known)											
Origin code and track designation													
<p>Place an x in one box only:</p> <table> <tr> <td><input checked="" type="checkbox"/> 1. F01 Original Complaint</td> <td><input type="checkbox"/> 4. F04 District Court Appeal c.231, s. 97 &amp;104 (After trial) (X)</td> </tr> <tr> <td><input type="checkbox"/> 2. F02 Removal to Sup.Ct. C.231,s.104 (Before trial). (F)</td> <td><input type="checkbox"/> 5. F05 Reactivated after rescript; relief from judgment/Order (Mass.R.Civ.P. 60) (X)</td> </tr> <tr> <td><input type="checkbox"/> 3. F03 Retransfer to Sup.Ct. C.231,s.102C (X)</td> <td><input type="checkbox"/> 6. E10 Summary Process Appeal (X)</td> </tr> </table>				<input checked="" type="checkbox"/> 1. F01 Original Complaint	<input type="checkbox"/> 4. F04 District Court Appeal c.231, s. 97 &104 (After trial) (X)	<input type="checkbox"/> 2. F02 Removal to Sup.Ct. C.231,s.104 (Before trial). (F)	<input type="checkbox"/> 5. F05 Reactivated after rescript; relief from judgment/Order (Mass.R.Civ.P. 60) (X)	<input type="checkbox"/> 3. F03 Retransfer to Sup.Ct. C.231,s.102C (X)	<input type="checkbox"/> 6. E10 Summary Process Appeal (X)				
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CODE NO.		TYPE OF ACTION AND TRACK DESIGNATION (See reverse side)											
		TYPE OF ACTION (specify)	TRACK										
			IS THIS A JURY CASE?										
B22		Refusal to Hire	( F ) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
<p>The following is a full, itemized and detailed statement of the facts on which plaintiff relies to determine money damages. For this form, disregard double or treble damage claims; indicate single damages only.</p>													
TORT CLAIMS													
(Attach additional sheets as necessary)													
<p>A. Documented medical expenses to date:</p> <table> <tr> <td>1. Total hospital expenses .....</td> <td>\$ .....</td> </tr> <tr> <td>2. Total Doctor expenses .....</td> <td>\$ .....</td> </tr> <tr> <td>3. Total chiropractic expenses .....</td> <td>\$ .....</td> </tr> <tr> <td>4. Total physical therapy expenses .....</td> <td>\$ .....</td> </tr> <tr> <td>5. Total other expenses (describe) .....</td> <td>\$ .....</td> </tr> </table>				1. Total hospital expenses .....	\$ .....	2. Total Doctor expenses .....	\$ .....	3. Total chiropractic expenses .....	\$ .....	4. Total physical therapy expenses .....	\$ .....	5. Total other expenses (describe) .....	\$ .....
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<p>B. Documented lost wages and compensation to date .....</p>													
<p>C. Documented property damages to date .....</p>													
<p>D. Reasonably anticipated future medical and hospital expenses .....</p>													
<p>E. Reasonably anticipated lost wages .....</p>													
<p>F. Other documented items of damages (describe) Attorney's Fees &amp; Expenses to date</p>													
<p>G. Brief description of plaintiff's injury, including nature and extent of injury (describe) \$ .187,000.00</p>													
<p>The defendant has refused to rehire the Plaintiff in violation of M.G.L. Ch.152 sec.75A. Plaintiff seeks monetary damages and further damages per said statute.</p>													
<p>Subtotal \$ .....</p> <p>\$ .....</p> <p><b>TOTAL \$ .187,000.00</b></p>													
CONTRACT CLAIMS													
(Attach additional sheets as necessary)													
TOTAL \$ .....													
<p>PLEASE IDENTIFY, BY CASE NUMBER, NAME AND COUNTY, ANY RELATED ACTION PENDING IN THE SUPERIOR COURT DEPARTMENT</p>													
<p>"I hereby certify that I have complied with the requirements of Rule 5 of the Supreme Judicial Court Uniform Rules on Dispute Resolution (SJC Rule 1:18) requiring that I provide my clients with information about court-connected dispute resolution services and discuss with them the advantages and disadvantages of the various methods."</p>													
Signature of Attorney of Record		DATE: 10/24/04											